TP 3 721

PATENT Atty. Docket No.: 2748CON(203-3036CON)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

blicant(s): John E. Carlson, et al.

Examiner: Michael H. Thaler

Serial No .:

09/994,980

Group: Art Unit 3731

Filed:

November 27, 2001

Dated: September 7, 2005

OTHER THAN

For:

SYSTEM AND METHOD FOR ESTABLISHING VASCULAR ACCESS

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [] Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a verified statement previously submitted.
- [] A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.
- [X] No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	SM	SMALL ENTITY			SMALL ENTITY	
	CLAIM REMAI AFTER AMENI	INING	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RA ⁻	ADDIT. FE FEE	OR	RATE	ADDIT. FEE
TOTAL	25	MINUS	50	=	X 9	\$	X	18	\$0
INDEP.	3	MINUS	5	=	X 43	\$	Х	86	\$0
□ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					X 140	\$	Х	280	\$0
					TOTA	L	OR T	OTAL	\$0

ADDIT. FEE \$ -0-

Francesco Sardone

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Services first class mail, postpaid in an envelope, addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 223131450 on date below.

Dated: September 7, 2005

^{*} If the entry in Co. 1 is less than entry in Col. 2, write "0" in Col. 3.

^{**} If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

^{***} If the "Highest No. Previously Paid For" IN THIS SPÆE is less than 3, enter "3".

The Highest No. Previously Paid For" (Total or indep.) is the highest number for

The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

- Please charge Deposit Account No. 21-0550 in the amount of \$0.00. Two (2) copies of this sheet are enclosed. [] A check in the amount of \$____ is enclosed.
- [X] Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 21-0550. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 21-0550 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,

Francesco Sardone Reg. No. 47,918

Attorney for Applicant(s)

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FS/td



PATENT APPLICATION

Attorney Docket: <u>2748CON (203-3036CON)</u>

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SYSTEM AND METHOD FOR ESTABLISHING VASCULAR ACCESS

Mail Stop: Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT "C"

Sir:

In response to the Office Action mailed June 7, 2005, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Amendments to the Drawings begin on page 8 of this paper and include an attached replacement sheet.

Remarks/Arguments begin on page 9 of this paper.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to the: Mail Stop: Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: September 7, 2005

Francesco Sardone